

Company/Headquarters: _____
(As it will appear in the CRA Membership Directory)

Web Address: _____

Name of Contact Person: _____ E-Mail Address: _____

Mailing Address _____

Shipping Address: _____

City: _____ County: _____ State: _____ Zip: _____

Phone: (____) _____ Toll Free: (____) _____ Fax: (____) _____

VOTING MEMBERS: Firms which are domiciled in the western states and are regularly engaged in some phase of the rental industry

Regular Member: Total Corporate Volume including Branches

_____ Under \$250,000 per annum	\$275.00	
_____ \$250,000 to \$1,000,000	\$375.00	
_____ \$1,000,000 to \$2,500,000	\$550.00	
_____ OVER \$2,500,000	\$625.00	\$ _____

Please circle the Regular Member equipment categories on the back of this form that describe your business.

Multiple Location Member: Organization that owns more than ten (10) rental centers

_____ Headquarters only	\$625.00	
_____ All western states locations receive mailings		
_____ Number of locations (__) x \$50 each = _____	+ \$625.00 =	\$ _____

(Maximum dues is \$2,000.00)

NON-VOTING MEMBERS:

Associate Member: Suppliers to the rental industry

\$350.00	\$ _____
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Please circle the Associate Member equipment categories on the back of this form that describe your business.

Member at Large: Rental firms domiciled outside the western states

\$250.00	\$ _____
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International Member: Any rental firm not within the United States, Canada or Mexico

\$250.00	\$ _____
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***Branch Members:** Headquarters must be a voting member (use reverse side to list each branch)

_____ x BRANCH FEE	\$ 85.00	\$ _____
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***Individual Member:** Only home address accepted

\$ 85.00	\$ _____
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INITIATION FEE: All new members, except Branch or Individual, are required to pay a one-time initiation fee to help offset the cost of set-up and the initial services and materials

\$ 50.00

**Branch and Individual members may receive the same initial services and materials as regular members by paying the initiation fee.*

Contributions or gifts to the California Rental Association are not deductible as charitable contributions for Federal income tax purposes. Dues may be deductible under provisions of the Internal Revenue Code, subject to restrictions imposed as a result of association lobbying activities. CRA estimates that the nondeductible portion of your 2003-04 dues (the portion which is allocable to lobbying) is 30%.

TOTAL SUBMITTED WITH APPLICATION: \$ _____
(Remember your signature on reverse side)

**QUESTIONS? PLEASE CALL 800.272.7400 OR 916.922.4222
FAX 916.922.4242 OR EMAIL: info@craonthenet.org**

Regular Member - Equipment Categories

The following equipment categories will be used for our directory as well as for customer referral. Circle all that apply.

- | | | | |
|---------------------------------|---------------------------------|---------------------------|------------------------|
| A. Disaster Equipment | H. Light Construction Equipment | O. Computers | V. Special Event Props |
| B. Generators | I. Homeowner Equipment | P. Medical - Sickroom | W. Tables and Chairs |
| C. Traffic Control | J. Lawn and Garden | Q. Audio Visual Equipment | X. Tents |
| D. Forklifts | K. Utility Trailers - Local | R. Recreation | Y. Wedding Accessories |
| E. Scaffolding | L. Utility Trailers - One Way | S. Party Equipment | Z. Other _____ |
| F. High Reach Equipment | M. Trucks - Local | T. Catering | _____ |
| G. Heavy Construction Equipment | N. Trucks - One Way | U. Party Supplies | |

Associate Member - Equipment Categories

The following equipment categories will be used for customer referral. Circle all that apply.

- | | | | |
|--------------------------|--|----------------------------------|--------------------|
| AA. Disaster Equipment | II. Trailers - Tow Dollies - Moving Supplies | PP. Automotive Tools | XX. Special Events |
| BB. Generators | JJ. Trucks | QQ. Floor Care | YY. Tents |
| CC. Traffic Control | KK. Concrete Equipment | RR. Lawn and Garden Equipment | ZZ. Other _____ |
| DD. High Reach Equipment | LL. Painting Equipment | SS. Light Construction Equipment | _____ |
| EE. Pumps | MM. Trenchers | TT. Power Tools | |
| FF. Air Compressors | NN. Heavy Construction Equipment | UU. Computer - Audio Visual | |
| GG. Scaffold - Ladder | OO. Homeowner Tools | VV. Services | |
| HH. Tractors | | WW. Party Equipment Supplies | |

Branch Memberships (Each branch listed must pay branch fee.)

BRANCH NAME: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Contact Person: _____
 Phone: (____) _____ Fax: (____) _____
 Equipment Categories: _____

BRANCH NAME: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Contact Person: _____
 Phone: (____) _____ Fax: (____) _____
 Equipment Categories: _____

BRANCH NAME: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Contact Person: _____
 Phone: (____) _____ Fax: (____) _____
 Equipment Categories: _____

BRANCH NAME: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Contact Person: _____
 Phone: (____) _____ Fax: (____) _____
 Equipment Categories: _____

Sponsors

All Voting Membership applications must include the names, signatures, or letters of endorsement from two (2) sponsoring Voting CRA members. Sponsors are Voting CRA members who believe the applicant demonstrates the standards and adheres to the Code of Ethics of CRA and whose membership would be mutually beneficial to both the applicant and the Association. All sponsors will be contacted for verification of your eligibility.

 SPONSOR SIGNATURE

 PRINT NAME

 SPONSOR COMPANY NAME

 SPONSOR PHONE NUMBER

 SPONSOR SIGNATURE

 PRINT NAME

 SPONSOR COMPANY NAME

 SPONSOR PHONE NUMBER

I (we) herewith make application for membership in the California Rental Association. I (we) agree to abide by the Articles of Incorporation and By-Laws of the California Rental Association and all rules and regulations promulgated by the Board of Directors.

By signing below, I also consent to receive all FAX communications sent by or on behalf of CRA, WRS, CRBC, RSIF, and CRA-PAC. Yes No




By signing below, I also consent to receive all E-MAIL communications sent by or on behalf of CRA, WRS, CRBC, RSIF, and CRA-PAC. Yes No

Date: _____ Signature: _____

PAYMENT METHOD:
 CHECK (only U.S. Funds accepted) payable to California Rental Association
 CREDIT CARD

FOR OFFICE USE ONLY:
 \$ _____ Amount
 _____ Check #/Auth.#
 Date entered _____ by _____

IF PAYING BY CREDIT CARD, COMPLETE THIS BOX:

Card # _____ Exp. Date _____
 Cardholder's Name _____ Security Code _____
 Cardholder's Signature _____ Billing Zip Code _____